


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 04, 2007 8:00 am
Secretary of State

05-07-2007 90064 022 ****50.00

06-04-2007 90011 010 ***100.00

DOCUMENT # P05000084453			
1. Entity Name THE R.H. ELLIOTT GROUP, INC.			
Principal Place of Business 2121 WOOD STREET UNIT B105 SARASOTA, FL 34237 US		Mailing Address 2121 WOOD STREET SAME UNIT B105 SARASOTA, FL 34237 US	
2. Principal Place of Business - No P.O. Box # 1343 MAIN ST STE 501		3. Mailing Address SAME	
Suite, Apt. #, etc. STE 501		Suite, Apt. #, etc.	
City & State Sarasota FL		City & State	
Zip 34236 Country USA		Zip Country	
6. Name and Address of Current Registered Agent THOMAS C. TYLER, JR., P.A. 981 RIDGEWOOD AVENUE SUITE 104 VENICE, FL 34285		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE <u>THOMAS C. TYLER, JR. P.A.</u> Signature, typed or printed name of registered agent and (if applicable) (NOTE: Registered Agent signature required when reinstating) DATE			
FILE NOW!!! FEE IS \$550.00 Due by September 14, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	888 ELLIOTT, ROBERT H <input checked="" type="checkbox"/> Delete 2121 WOOD STREET, UNIT B105 SARASOTA, FL 34237 owner/pres.	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	ROBERT H. ELLIOTT <input type="checkbox"/> Delete 1343 MAIN ST STE 501 SARASOTA, FL 34236	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

SIGNATURE.

Robert H. Elliott

5/1/07

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

New address only